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Bib Data Sheet

CONFIRMATION NO. 1049

|                                    |   |                     |                               |                                      |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/790,499 | <b>FILING OR 371(c) DATE</b><br>03/01/2004<br><b>RULE</b> | <b>CLASS</b><br>044 | <b>GROUP ART UNIT</b><br>1714 | <b>ATTORNEY DOCKET NO.</b><br>MMC100 |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------------|

## APPLICANTS

Clark Schaefer, Seattle, WA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/450,971 02/28/2003

CD7

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/21/2004

\*\* SMALL ENTITY \*\*

|  |   |                               |                            |                           |                                |
|--|---|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <u>CD7</u> Initials _____ | <b>STATE OR COUNTRY</b><br>WA | <b>SHEETS DRAWING</b><br>0 | <b>TOTAL CLAIMS</b><br>19 | <b>INDEPENDENT CLAIMS</b><br>4 |
|--|---|-------------------------------|----------------------------|---------------------------|--------------------------------|

## ADDRESS

20482

## TITLE

Creosote and soot destroying fire log

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>428 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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